

Dutiful Minds – Dealing with Mental Illness

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This is the ninth article in a series about effectively dealing with mentally ill offenders in the criminal justice system. Justice Evelyn Lundberg Stratton, Supreme Court of Ohio, has had a longtime interest in developing solutions to this problem and has formed the Supreme Court of Ohio Advisory Committee on Mentally Ill in the Courts for that purpose. This article highlights one committee member's experiences in dealing with the mentally ill from his perspective as a law enforcement officer.

How much training have police officers had in dealing with persons that have mental illness? I suspect the answer is “Not much”! Yet, did you know that anywhere from 7 to 15% of the calls to which a police officer responds in this country involve someone with a mental illness?

I recently retired after 25 years with the Akron Police Department in Akron, Ohio. After having served in various capacities, I retired as the Director of Training. This article chronicles my journey to the dutiful mind.

What is Deliberate Indifference?

Akron is only 15 miles north of Canton, Ohio where the term “deliberate indifference” was born. Without getting into the details of the civil case, the U.S. Supreme Court concluded that inadequacy of police training may serve as a basis for municipal liability where failure to train amounts to deliberate indifference for the rights of persons with whom the police come into contact. Accordingly, the Court said that the City of Canton was negligent in failing to train their police officers in first aid on a regular basis because the probability of needing to use first aid in police work was so high.

Deliberate Indifference with regard to the Mentally Ill

A little over three years ago I realized that roughly 10% of our customers were not only mentally ill but also in crisis. It was my opinion that our department lacked sufficient training in this area. At the same time, the State of Ohio Police Officer Training Council reduced the requirements to teach recruits how to deal with persons in mental crisis to 2 hours of training regarding handling the mentally ill and the mentally retarded. Providing equal time for both subjects, recruits receive one-hour of training to equip them to deal with about 10% of the problems they will encounter on the streets.

With the help of our Alcohol, Drug, & Mental Health Board (ADM), I immersed myself in this subject with the idea of providing officers the absolute best comprehensive training in handling these potentially dangerous calls.

The Memphis Model

I attended the Memphis Crisis Intervention team program which provides intensive training in mental health to volunteer officers. The program not only teaches the officers about mental illness and the local service system, but also emphasizes officers learning new skills to de-escalate individuals in mental crises. Once trained, as part of their ongoing patrol duties, CIT officers are called upon to respond to all calls thought to involve persons with mental illness.

I brought back the Memphis, Tennessee CIT training manual and shared it with key people on our ADM Board. Together we formed a partnership, to include the local and state National Alliance for the Mentally Ill (NAMI).

Building a CIT in Akron: Learning a New Language

It was obvious from the start that the criminal justice and mental health system knew very little about each others profession. It was critical that we learn each others language, so in putting together our CIT training, we decided to strongly encourage mental health professionals taking part in the CIT training to do ride-a-longs with the police. Just 8 hours of walking in a street officer's shoes gave mental health professionals a better understanding of what we do. Similarly, in the CIT training the officers got a chance to walk in the shoes of mental health treatment professionals through ride-a-longs with caseworkers and visits to the many different mental health facilities and social clubs for persons with this devastating illness.

NAMI

NAMI is fairly well known throughout the United States but is often a foreign term to police officers. The stories I have heard from NAMI members are heartbreakers. Each member has a loved one, usually a child, who has oftentimes suddenly developed this horrible illness to which there is no cure. Only with the correct medication is there a chance to keep it under control.

They cry out for help – sometimes to the police when there is a crisis, but up to now they have been somewhat afraid to pick up that phone. Why? Because they are not sure that they are going to get an officer who truly knows how to interact with someone in mental crisis.

Communication is the Key

In determining who in my department should go through CIT training, I had to ask myself what values are essential to becoming an effective CIT officer. The single most important skill is the ability to communicate.

There are those unfortunate officers who have not been given the training to communicate with the public in any situation – and would love to have it. There are also officers for whom it just comes natural to communicate easily with individuals. But, there are officers out there who not only do not know how to talk

to people but, don't want to learn how. Some officers believe that command-type vernacular is correct in all situations. FBI studies have shown that an officer who lets his or her guard down and appears "weak" is more likely to get injured or killed.

But, do you know that this course of action can easily backfire when trying to deal with someone in mental crisis? A mentally ill person needs the calm, caring voice of someone who understands the illness, the medications, the "voices", the support groups available, etc. The uniform can be very frightening to persons in mental crisis. Add to that an officer commanding a person hearing voices to "stop and desist" and the outcome can turn out less than that desired by everyone present.

I am in no way telling officers to let down their guard. Recent studies show that over 1,000 homicides per year in our country are committed by persons with a mental illness. **Officer safety comes first.** It should always be on ones mind when dealing with this very unpredictable type of person. But, it may be a wise officer who can camouflage his/her "combat ready" status in such situations.

What happened after CIT?

NAMI parents no longer had to worry about getting "Officer Unfriendly" at their door. Instead they got an officer who knew how to handle this situation and had probably been at the house before and built up a relationship with the person in crisis. Special people deserve special officers.

Now, 3 years into our CIT program there is a standing list of officers who want to wear the CIT pin on their uniform. The training is offered twice per year and other police agencies in Ohio are encouraged to attend. In our most recent training we even had an officer from Turkey present, along with persons from Pennsylvania. Officers love the program so much that they frequently ask for "Advanced CIT" training.

Where do we go from here?

I have been appointed to the Supreme Court of Ohio Advisory Committee on Mentally Ill in the Courts, chaired by Justice Evelyn Lundberg Stratton. The goal of the committee is to change the way the criminal justice system handles persons with mental illness, whether it be through mental health courts (Akron has one –run by Judge Eleanor Marsh Stormer) or other diversion alternatives. I am currently the chairperson of a subcommittee titled "Police Training". Our goal is for all police agencies in our state to give officers the much needed training to appropriately deal with people in mental crisis.

President Bush selected the director of the Ohio Department of Mental Health, Dr. Michael Hogan, to lead the "New Freedom Commission" to examine how the criminal justice system treats persons with mental illness, and to offer viable alternatives.

It is my belief that things are going to change for the better in this country – soon. With movies like “A Beautiful Mind” awakening our knowledge to such a horrendous illness and the Surgeon General finally classifying mental illness as a true disease the writing is on the wall. When an Ohio Supreme Court Justice publicly states that “there are people in jail who do not belong there,” when NAMI gets tough and says “we’re mad as heck and not going to take it anymore,” by God’s grace, things will change for the better and police agencies will have a dutiful mindset.

Lieutenant Michael S. Woody – Retired: was the Director of Training for the Akron Police Department. The Akron Police Department received \$1.3 million dollars from the federal government to start up this program. Of the 18,500 police departments across the country that have grants Akron was picked as one of 500 that are being showcased as “Best Use of Funds”. Lt. Woody received the national “The Major Sam Cochran Award for Compassion in Law Enforcement” in 2002 and “The Heart of Gold Award” in 2001 from the Mental Health Board of Summit County. He is currently affiliated with the Northeast Ohio Universities College of Medicine in Rootstown, Ohio and may be reached at: michael.s.woody@earthlink.net

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